#### REDACTED - FOR PUBLIC INSPECTION

June 29, 2015

Charles Tyler
Telecommunications Access Policy Division
Wireline Competition Bureau
Federal Communications Commission
445 12th Street, S.W., Room 5-A452
Washington, D.C. 20554

Re: FCC FORM 481 INCLUDING CONFIDENTIAL FINANCIAL INFORMATION – SUBJECT TO PROTECTIVE ORDER IN WC DOCKET NOS. 10-90, 07-135, 05-337, 03-109, CC DOCKET NOS. 01-92, 96-45, GN DOCKET NO. 09-51, WT DOCKET NO. 10-208, BEFORE THE FEDERAL COMMUNICATIONS COMMISSION

Dear Mr. Tyler:

Enclosed herein is one copy of the FCC Form 481 including 2012 audited financial statements — Stamped Confidential — of Rainbow Communications LLC, Study Area Code 419039, in accordance with 47 C.F.R. § 54.313(f)(2) of the Commission's rules, the redacted form has been filed using the FCC's Electronic Comment Filing System in Docket No. WC 10-90, per the instructions for filing the FCC Form 481. Rainbow Communications LLC is submitting the enclosed confidential financial information pursuant to the Protective Order in the above-referenced dockets (DA 12-1857, released November 16, 2012). It is Rainbow Communications LLC understanding that the enclosed confidential financial information will be deemed material not to be made routinely available for public inspection under the Commission's rules, 47 C.F.R. §§ 0.459(a) and 0.459(a)(3).

Respectfully submitted,

Beverly Armstrong

Accounting Manager

FCC Fo	rm 481 - Carrier Annual Reporting Data Collection Form		FCC Form 481 OMB Control No. July 2013	3060-0986/OMB Control No. 3060-0819
<010>	Study Area Code	419039		
<015>	Study Area Name	Carson Communica	tions, LLC	
<020>	Program Year	2016		a car anna and the
<030>	Contact Name: Person USAC should contact with questions about this data	Beverly Armstron	g	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	7855487511 ext.1		ANNOUNCE CONTROL
<039>	Contact Email Address: Email of the person identified in data line <030>	bev@rainbowtel.c	om	
ANNUA	AL REPORTING FOR ALL CARRIERS			54.313 54.422 Completion Completion Required Required
<100>	Service Quality Improvement Reporting		(complete attached worksheet)	(check box when complete)
<200>	Outage Reporting (voice)		(complete attached worksheet)	<b>/</b>
<210>	< check box if no	outages to report		V   S   S   S   S   S   S   S   S   S
<300>	Unfulfilled Service Requests (voice) 0			1
<310>	Detail on Attempts (voice)		-	
			(attoch descrip	tive document)
<320>	Unfulfilled Service Requests (broadband)			
	Date II and Attack to the Albert II		>	
<330>	Detail on Attempts (broadband)		(attach descri	otive document)
<400>	Number of Complaints per 1,000 customers (voice)			9
<410>	Fixed 0.0			<b>√</b> ✓
<420> <430>	Mobile 0.0 Number of Complaints per 1,000 customers (broadb	and)		
<440>	Fixed			
<450> <500>	Mobile Service Quality Standards & Consumer Protection Ru	ales Compliance	(check to indicate certification)	/ /
13002	419039ks510.pdf	200 m/	The state of the s	
<510>			(attached descriptive document) .	· / /
				1-
<600>	Functionality in Emergency Situations		(check to indicate certification)	
	419039ks610.pdf			
			(attached descriptive document)	<b>✓</b> ✓
<610>		9		
<700>	Company Price Offerings (voice)		(complete attached worksheet)	
<710>	Company Price Offerings (broadband)		(complete attached worksheet)	
<800>	Operating Companies and Affiliates		(complete attached worksheet)	
	Voice Services Rate Comparability Certification		(If yes, complete attached worksheet) Yes	7
	419039ks1010.pdf			1
<1010>			(attach descriptive document)	<b>✓</b>
<1100>	Certify whether terrestrial backhaul options exist (Ye	es or No) 💿 (	(if not, check to indicate certification)	
<1110>			(complete attached worksheet)	
<1200>	Terms and Condition for Lifeline Customers		(complete attached worksheet)	
	Price Cap Carriers, Proceed to Price Cap Additional D			
<2000>	Including Rate-of-Return Carriers affiliated with Pric	e cap Local Exchan	ge Carriers (check to indicate certification)	
2005>	10 20 2000 P. AND D. AN	59 45505	(complete attached worksheet)	
:3000>	Rate of Return Carriers, Proceed to <u>ROR Additional D</u>	Occumentation Wo	rksheet (check to indicate certification)	1888883
<3005>			(complete attached worksheet)	

	rvice Quality Improvement Reporting FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code 419039
<015>	Study Area Name Carson Communications, LLC
<020>	Program Year 2016
<030>	Contact Name - Person USAC should contact regarding this data Beverly Armstrong
<035>	Contact Telephone Number - Number of person identified in data line <030> 7855487511 ext.1106
<039>	Contact Email Address - Email Address of person identified in data line <030> bev@rainbowtel.com
<110>	Has your company received its ETC certification from the FCC?  If your answer to Line <110> is yes, do you have an existing §54.202(a) "5
<111>	year plan" filed with the FCC? (yes / no )
<112>	report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.  Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.
	Please select the appropriate responses below (Yes, No, Not Applicable) to confirm that the attached document(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to §54.202(a). The information shall be submitted at the wire center level or census block as appropriate.
<113>	Maps detailing progress towards meeting plan targets  Not Applicable
<114>	Report how much universal service (USF) support was received Not Applicable
<115>	How much (USF) was used to improve service quality and how support was used to improve service quality  Not Applicable
<116>	How much (USF) was used to improve service coverage and how support was used to improve service coverage  Not Applicable
<117>	How much (USF) was used to improve service capacity and how support was used to improve service capacity  Not Applicable
<118>	Provide an explanation of network improvement targets not met  Not Applicable  Not Applicable

(200) Service Outage Repor	rting	1	loice)	
Data Collection Form	122		۸.	

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code	419039
<015>	Study Area Name	Carson Communications, LLC
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Beverly Armstrong
<035>	Contact Telephone Number - Number of person identified in data line <030>	7855487511 ext.1106
<039>	Contact Email Address - Email Address of person identified in data line <030>	bev@rainbowtel.com

-	<a></a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h></h>
	NORS Reference Number	Outage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple	Service Outage Resolution	Preventative Procedures
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			1							No controls		
F		1	-									

Data Coll	e Offerings including Voice Rate Data ection Form	FCC-Form 481 ÖMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<01.0>	Study Area Code	419039
<015>	Study Area Name	Carson Communications, LLC
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Beverly Armstrong
<035>	Contact Telephone Number - Number of person identified in data line <030>	7855487511 ext.1106
<039>	Contact Email Address - Email Address of person identified in data line <030>	bev@rainbowtel.com .
<701>	Residential Local Service Charge Effective Date  1/1/2015 Single State-wide Residential Local Service Charge	

<703>

State	Exchange (ILEC)	SAC (CETC)	. Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fe
						- , , , , , , , , , , , , , , , , , , ,		
			74000					
							1 10 10 10 10 10 10 10 10 10 10 10 10 10	
				- See a	ttached worksheet			
					-			
			***************************************					
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***************************************								

(710) Broadband Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	419039	
<015>	Study Area Name	Carson Communications, LLC	
<020>	Program Year	2016	
<030>	Contact Name - Person USAC should contact regarding this data	Beverly Armstrong	
<035>	Contact Telephone Number - Number of person identified in data line <030>	7855487511 ext.1106	
<039>	Contact Email Address - Email Address of person identified in data line <030>	bev@rainbowtel.com	

<711>

<pre><pre></pre></pre>	- <b>2</b> >	<b1></b1>	<b2></b2>	<c></c>		<d2></d2>	<d3></d3>	
State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select
					19			
								[4]
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							A A A A A A A A A A A A A A A A A A A	

FCC Form 481

A WENT ON	ection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		419039
<015>	Study Area Name		Carson Communications, LLC
<020>	Program Year		2016
<030>	Contact Name - Person	USAC should contact regarding this data	Beverly Armstrong
<035>	Contact Telephone Nun	nber - Number of person identified in data line <030>	7855487511 ext.1106
<039>	Contact Email Address -	Email Address of person identified in data line <030>	Dev@rainbowtel.com
<810>	Reporting Carrier	Rainbow Communications, LLC	
<811>	Holding Company	Not Applicable	
<812>	Operating Company	Rainbow Telecommunications Association, Inc	

(800) Operating Companies

<b><a1></a1></b>	<82>	<a3></a3>
Affiliates	SAC	Doing Business As Company or Brand Designation
A CONTRACTOR OF THE CONTRACTOR		
Addition to the state of the st		
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The second of the second	oal Lands Reporting		FCC Form 481
Data Coll	ection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	419039	
<015>	Study Area Name	Carson Communications, LLC	
<020>	Program Year	2016	
<030>	Contact Name - Person USAC should contact regarding this data	Beverly Armstrong	
<035>	Contact Telephone Number - Number of person identified in data line <	THE PROPERTY OF THE PROPERTY O	
<039>	Contact Email Address - Email Address of person identified in data line <	(030> bev@rainbowtel.com	
<910>	Tribal Land(s) on which ETC Serves		=
3	* **		
<920>	Tribal Government Engagement Obligation	Name	e of Attached Document .
to confi demons	company serves Tribal lands, please select (Yes,No, NA) for each these boxes irm the status described on the attached document(s), on line 920, strates coordination with the Tribal government pursuant to 3(a)(9) includes:	Select Yes or No or Not Applicable	
<921>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions.		8
<922>	Feasibility and sustainability planning;		
<923>	Marketing services in a culturally sensitive manner;		
<924>	Compliance with Rights of way processes		
<925>	Compliance with Land Use permitting requirements		
<926>	Compliance with Facilities Siting rules		
<927>	Compliance with Facilities Statis (titles  Compliance with Environmental Review processes		
<928>	Compliance with Cultural Preservation review processes		
<929>	Compliance with Tribal Business and Licensing requirements.		
70207	Comprising with most positions and Liberaring requirements.		

The College William	o Terrestrial Backhaul Reporting lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	419039	
<015>	Study Area Name	Carson Communications, LLC	
<020>	Program Year	2016	
<030>	Contact Name - Person USAC should contact regarding this data	Beverly Armstrong	
<035>	Contact Telephone Number - Number of person identified in data line <030>	7855487511 ext.1106	
<039>	Contact Email Address - Email Address of person identified in data line <030>	beverainbowtel.com	
<1120>	Please confirm whether terrestrial backhaul options exist within the supported area pursuant to § 54.313(g) (Yes, No).		
<1130>	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 upstream within the supported area pursuant to § 54.313(g).	kbps	

(1200) Te Lifeline	rms and Condition for Lifeline Customers	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819
Data Coll	ection Form			July 2013
<010>	Study Area Code		419039	
<015>	Study Area Name		Carson Communications, LLC	
<020>	Program Year		2016	
<030>	Contact Name - Person USAC should contact regarding this data	1177	Beverly Armstrong	
<035>	Contact Telephone Number - Number of person identified in data line	<030>	7855487511 ext.1106	
<039>	Contact Email Address - Email Address of person identified in data line	<030>	bev@rainbowtel.com	
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans			
	*			Name of Attached Document
<1220>	Link to Public Website	TTP %	ww.rainbowtel.net/services/phone	
or the we	heck these boxes below to confirm that the attached document(s), on line 121 absite listed, on line 1220, contains the required information pursuant to (a)(2) annual reporting for ETCs receiving low-income support, carriers must report:	0,		×
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	✓	s	
<1222>	Details on the number of minutes provided as part of the plan,	<b>✓</b>		
<1223>	Additional charges for toll calls, and rates for each such plan.	1		

	ce Cap Carrier Additional Documentation			C Form 481 MB Control No.: 3060-0986/OMB Control No.: 3060-0819
Francisco Santo	Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers			ly 2013
	**************************************			
<010>	Study Area Code	414034		A CONTRACTOR OF THE CONTRACTOR
<015>	Study Area Name	Carson Communications, ELC		COLUMN TO THE STATE OF THE STAT
<020>	Program Year	2016		
<030>	Contact Name - Person USAC should contact regarding this data	Beverly Armstrong		· · · · · · · · · · · · · · · · · · ·
<035>	Contact Telephone Number - Number of person identified in data line <030>	7855487511 ext.1106		
<039>	Contact Email Address - Email Address of person identified in data line <030>	bev@rainbowtel.com	The state of the s	
			and the second section of the second second second second section section (second second second second second	
Select the	e appropriate responses below (Yes, No, Not Applicable) to note compliance as	a recipient of Incremental Connect America P	hase I support, frozen High Cost sup	port, High Cost support to offset access charge reductions,
Connect	America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The inform	nation reported on this form and in the docur	nents attached below is accurate.	
	Incremental Connect America Phase I reporting	<u></u>		
<2010>	2nd Year Certification {47 CFR § 54.313(b)(1)i}			
<2011a	3rd Year Certification (47 CFR § 54.313(b)(1)ii)			
<2011b>	10.50.00 Material (1.50.00 Material (1.50.00 Material) (1.50.00 Mater			
*	(		2	
	Ø.	Name of Attache	d Document(s) Listing Required Informatio	
	Dalan Care Cambra Danabilan France Commant Cartification (ST CED & EA 2420-1)		A 2.00 Sept.	
<2012>	Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a)) 2013 Frozen Support Calculation (47 CFR § 54.313(c)(1))			
<2012>				
<2014>	3			
<2015>	4) 회사 회사는 100km 및 설계 200km (100km (1			
120402				
	Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
<2016>	Certification Support Used to Build Broadband			6
	Connect America Phase II Reporting (47 CFR § 54.313(e))			
<2017	Did year or obacatia oct vice ect aneation			
<2018	San year Di oddodna Schines est antesagon			
<2019				
<2020		e 2021, contains the required information	n T	
	pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support addresses of community anchor institutions to which began providing			
	preceding calendar year.	access to broadband service in the		**
	preceding calendar year.	F		
<2021:	> Interim Progress Community Anchor Institutions	1	50	
	ry convenience de Minardo mana ambiente actual act		22	
		1	<u>\$1</u>	,
	7			
		Name	of Attached Document(s) Listing Required 1	nformation

	te Of Return Carrier Additional Documentation	FCC Form 481  OMB Control No. 3050-0986/OMB Control No. 3060-0819
rata COIIE	SAULI FOIL	July 2013
<010>	Study Area Code	419039
<015>	Study Area Name	Carson Communications, LLC
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data  Contact Telephone Number - Number of person identified in data line <030>	Reverly Armstrong 7855487511 ext.1106
<039>	Contact Email Address - Email Address of person identified in data line <030>	bev@rainbowtel.com
CHECK th		It to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 4 is information reported on this form and in the documents attached below is accurate.
(3010)	Progress Report on 5 Year Plan Milestone Certification (47 CFR § 54.313(f)(1)(i))	
		Name of Attached Document Listing Required Information
(3011)	Please check this box to confirm that the attached document(s), on line 3 § 54.313 (f)(1)(ii), the carrier shall provide the number, names, and addreproviding access to broadband service in the preceding calendar year.	
		9
in a second		*
(3012)	Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))	
		Name of Attached Document Listing Required Information
	Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2)) If yes, does your company file the RUS annual report	Name of Attached Document Listing Required Information (Yes/No) (Yes/No) (Yes/No)
Please	check these boxes to confirm that the attached document(s), on line 301	7, contains the required information pursuant to § 54.313(f)(2) compliance requires:
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)	Company of the second s
(3016)	Document(s) for Balance Sheet, Income Statement and Statement of Ca	sh Flows
(3017)	if the response is yes on line 3014, attach your company's RUS annual report and all required documentation	34:
		Name of Attached Document Listing Required Information
/m.e		Name of Attached Document Listing Required Information
(3018)	If the response is no on line 3014, is your company audited?	(Yes/No)
/2015 <sup>1</sup>	If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains	
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a f  Document(s) for Balance Sheet, Income Statement and Statement of C	
(3020)		
(3021)	Management letter and audit opinion issued by the independent certified p	ublic accountant that performed the company's financial audit
	if the response is no on line 3018, please check the boxes below to confirm your submission, on line 3025 pursuant to § $54.913(f)(2)$ , contains:	
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers,	
(3023)	AND THE PROPERTY OF THE PROPER	
(3024)	Underlying information subjected to an officer certification,	
(3025)	Document(s) for Balance Sheet, Income Statement and Statement of C	ash Flows
		3.5

(3000) Rate Of Return Carrier Additional I Data Collection Form	Documentation (Continued)			FCC Form 481 OMB Control No. 3060 July 2013	-0986/OMB Central No. 3050-0819
	1444	Supervisite	 (*)		

<010>	Study Area Code	419039
<015>	Study Area Name	Carson Communications, LLC
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Beverly Armstrong
<035>	Contact Telephone Number - Number of person identified in data line <030>	7855487511 ext.1106
<039>	Contact Email Address - Email Address of person identified in data line <030>	bev@rainbowtel.com
TO SECURITY OF THE PARTY OF THE		peveralnbowcel.com

Financial Data Summary	
(3027) Revenue	
(3028) Operating Expenses	
(3029) Net Income	
(3030) Telephone Plant In Service(TPIS)	
(3031) Total Assets	
(3032) Total Debt	
(3033) Total Equity	
(3034) Dividends	

Certification - Reporting Carrier Data Collection Form	FCC Form 481 OMB Control No. July 2013	3060-0986/OMB Control No. 3060-0819
<010> Study Area Code	415039	

<010>	Study Area Code	415039
<015>	Study Area Name	Carson Communications, LLC
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<030>	Contact Name - Person USAC should contact regarding this data	Beverly Armstrong
<035>	Contact Telephone Number - Number of person identified in data line <030>	7855487511 ext.1106
<039>	Contact Email Address - Email Address of person identified in data line <030>	bev@rainbowtel.com

#### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

#### Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients

certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support reciplents; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.

Name of Reporting Carrier: Carson Communications, LLC

Signature of Authorized Officer:

Date

Printed name of Authorized Officer: Beverly Armstrong

Title or position of Authorized Officer: Director of Administration

Telephone number of Authorized Officer: 7855487511 ext.1106

Study Area Code of Reporting Carrier:

419039

Filing Due Date for this form: 07/01/2015

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

Certification - Agent / Carrier Data Collection Form	FCC Form 481 OMB Control No. July 2013	3060-0986/OMB Control No. 3060-0819
<010> Study Area Code	419039	

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<015>	Study Area Name	Carson Communications, LLC
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<035>	Contact Telephone Number - Number of person identified in data line <030>	7855487511 ext.1106
<039>	Contact Email Address - Email Address of person identified in data line <030>	bev@rainbowtel.com

#### TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier						
I certify that (Name of Agent) also certify that I am an officer of the reporting carrier; n agent; and, to the best of my knowledge, the reports an	is authorized to submit the information reported on behalf of the reporting carrier. In the provided to the authorized data provided to the authorized agent is accurate.					
Name of Authorized Agent:						
Name of Reporting Carrier:						
Signature of Authorized Officer:	Date:					
Printed name of Authorized Officer:						
Title or position of Authorized Officer:						
Telephone number of Authorized Officer:						
Study Area Code of Reporting Carrier:	Filing Due Date for this form:					
Persons wilifully making false statements on this form ca	n be punished by fine or forfelture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

### TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent	t Authorized to File Annual Reports for CAF	or I.I Reciplents on Behalf of Reporting Carrier
I, as agent for the reporting carrier, certify that I am aut the data reported herein based on data provided by the		ervice support recipients on behalf of the reporting carrier; I have provided , the information reported herein is accurate.
Name of Reporting Carrier:		
Name of Authorized Agent or Employee of Agent:		ds on Three-denies ds
Signature of Authorized Agent or Employee of Agent:		Date:
Printed name of Authorized Agent or Employee of Agent:		
Title or position of Authorized Agent or Employee of Agen	nt	TO MU I I I I I I I I I I I I I I I I I I
Telephone number of Authorized Agent or Employee of A	gent:	2.00
	Filing Due Date for this form:	

Attachments

Data Coll	lection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		419039
<015>	Study Area Name		Carson Communications, LLC
<020>	Program Year		2016
<030>	Contact Name - Person USAC should contact regarding this data	10000	Beverly Armstrong
<035>	Contact Telephone Number - Number of person identified in dat	a line <030>	7855487511 ext.1106
<039>	Contact Email Address - Email Address of person identified in da	ta line <030>	bev@rainbowtel.com
<701>	Residential Local Service Charge Effective Date	1/1/2015	
<702>	Single State-wide Residential Local Service Charge		

FCC Form 481

<703>

(700) Price Offerings including Voice Rate Data

State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	   State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fee
KS	Hiawatha		FR	17.8	0.0	1.15	0.0	18.95
KS	Highland		FR	17.8	0.0	1.15	0.0	18.95
KS	Horton		FR	17.8	0.0	1.15	0.0	18.95
KS	Sabetha		FR	15.7	0.0	1.02	0.0	16.72
KS	Seneca	,	FR	15.7	0.0	1.02	0.0	16.72
KS	Troy		FR	17.8	0.0	1.15	0.0	18.95
Ks	Wathena		FR	17.8	0.0	1.15	0.0	18.95
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#### FCC Form 481 Certifications

FCC Form 481 Lines 510 and 610

Rainbow Communications, LLC

# Line 510: Service Quality Standards & Consumer Protection Rules Compliance

## **Service Quality Standards**

The company complies with the service quality standards as adopted in the Kansas Corporation Commission (KCC) Docket Nos. 191,206-U and 95-GIMT-047-GIT.

#### **Consumer Protection Rules**

The company complies with the following consumer protection rules:

FCC rules regarding verification of orders for telecommunications service as required of submitting carriers {47 CFR §64.1100}

The FCC's Truth-in-Billing Requirements {47 CFR §64.2400}

Billing practice standards as set out in KCC Docket No. 06-GIMT-187-GIT and subsequent billing practice standards approved by the KCC.

All of the requirements of 47 CFR § Part 64 Subpart U, Customer Proprietary Network Information and Federal Trade Commission 16 CFR §681, Identity Theft Red Flag

# Line 610: Functionality in Emergency Situations

The company maintains a reasonable amount of back-up power to ensure functionality without and external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations. {47 CFR §54.3202(a)}

The company has made reasonable provisions to meet emergencies resulting from power failures; sudden and prolonged increases in traffic; staff shortages; and fire, storm, and acts of god.

Form 481 Line 1010 §54.313(a)(10) - Voice Services Rate Comparability

Rainbow Communications LLC (formally known as Carson Communications LLC) retail monthly residential local service rate is \$15.70 and \$17.80